PART B - FEE(S) TRANSMITTAL

OIPA		PART B	- FEE(S) TRA	ANSMITTAL		
Complete and send	Nhis form, together w	ith applicable (Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885	or Patents	,
	m should be used for tran rrespondence including the below or directed otherwise	smitting the ISSUI Patent, advance ord in Block 1, by (a)	E FEE and PUBL lers and notification specifying a new	ICATION FEE (if request of maintenance fees of correspondence address	nired). Blocks 1 through 5 will be mailed to the currer; and/or (b) indicating a se	should be completed where at correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPONDEN	CE ADDRESS (Note: Use Block 1 for	any change of address)		Fee(s) Transmittal, Th	is certificate cannot be used	for domestic mailings of the for any other accompanying tent or formal drawing, must
O26096 7590 02/14/2006 CARLSON, GASKEY & OLDS, P.C. 400 WEST MAPLE ROAD SUITE 350 PREMINISHAM ML48000				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
BIRMINGHAM, MI 48009 /24/2006 RMEBRAH1 00000050 10782192				LauraCombs (Depositor's name)		
				Surue (Signature)		
FC:1501 1400.00 DP FC:1504 300.00 DP			/ April 1		, 2006	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/782,192	02/19/2004 UNSHADE SYSTEM FOR		Horst Bohm	(50130-2031;03MRA0129/16	5 4102
		T.MOTOR VEINO				
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	· · · ·	\$300	\$1700	05/15/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
PATEL, KIRAN B		3612		296-097110	•	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			registered attorney or agent) and the names of up to			
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN ArvinMerit		elow, no assignee d of this form is NOT	ata will appear on a substitute for file (B) RESIDENCE: Germany	the patent. If an assigning an assignment. (CITY and STATE OR (
4a. The following fee(s) are Issue Fee Dublication Fee (No.		4b.	Payment of Fee(s) A check in the Payment by cre	e: amount of the fee(s) is eredit card. Form PTO-203	nclosed. 8 is attached.	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.			LL ENTITY status. See 37 (
NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issu ublication Fee (i) required) vords of the United States Par	vill not be accepted ent and Trademark (from anyone other			the assignee or other party i
Authorized Signature	//// hi			Date Ap	ril 18, 2006	·
Typed or printed name _	Merrie A. Lab	<i>''</i>		Registration 1	No. 42,777	
Alexandria, Vilginia 22313					the public which is to file (a minutes to complete, includ omments on the amount of the Trademark Office, U.S. De S. SEND TO: Commissione displays a valid OMB contro	